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PTO/SB/21 (6-98)  
Approved for use through 09/30/2000. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/905,187
Filing Date	July 12, 2001
First Named Inventor	Richard C. Eden et al.
Group Art Unit	2812
Examiner Name	D. Farahani
Attorney Docket Number	IS9-018

Total Number of Pages in This Submission

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Return Receipt Postcard Form PTO-1449
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	Cited Reference
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	A \$180.00 check
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	James D. Shaurette, Reg. No. 39,833 Wells St. John, P.S.
Signature	
Date	9/10/02

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 9-10-02

Typed or printed name	Natalie King
Signature	
Date	9-10-02

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# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (S) 180.00

Complete if Known

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## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:  
Deposit Account Number: 23-0925  
Deposit Account Name: Wells St. John, P.S.

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

1. BASIC FILING FEE					
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	201	740	370	Utility filing fee	
106	206	330	165	Design filing fee	
107	207	510	255	Plant filing fee	
108	208	740	370	Reissue filing fee	
114	214	160	80	Provisional filing fee	
SUBTOTAL (1)					(S)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims Fee from below Fee Paid

Total Claims -20\*\* =  X  =

Independent Claims -3\*\* =  X  =

Multiple Dependent  =

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
103	203	18	9	Claims in excess of 20	
102	202	84	42	Independent claims in excess of 3	
104	204	280	140	Multiple dependent claim, if not paid	
109	209	84	42	** Reissue independent claims over original patent	
110	210	18	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(S)

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

3. ADDITIONAL FEES					
Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
105	205	130	65	Surcharge - late filing fee or oath	
127	227	50	25	Surcharge - late provisional filing fee or cover sheet	
139	139	130	130	Non-English specification	
147	147	2,520	2,520	For filing a request for ex parte reexamination	
112	112	920*	920*	Requesting publication of SIR prior to Examiner action	
113	113	1,840*	1,840*	Requesting publication of SIR after Examiner action	
115	215	110	55	Extension for reply within first month	
116	216	400	200	Extension for reply within second month	
117	217	920	460	Extension for reply within third month	
118	218	1,440	720	Extension for reply within fourth month	
128	228	1,960	980	Extension for reply within fifth month	
119	219	320	160	Notice of Appeal	
120	220	320	160	Filing a brief in support of an appeal	
121	221	280	140	Request for oral hearing	
138	138	1,510	1,510	Petition to institute a public use proceeding	
140	240	110	55	Petition to revive - unavoidable	
141	241	1,280	640	Petition to revive - unintentional	
142	242	1,280	640	Utility issue fee (or reissue)	
143	243	460	230	Design issue fee	
144	244	620	310	Plant issue fee	
122	122	130	130	Petitions to the Commissioner	
123	123	50	50	Processing fee under 37 CFR 1.17(q)	
126	126	180	180	Submission of Information Disclosure Stmt	180.00
581	581	40	40	Recording each patent assignment per property (times number of properties)	
146	246	740	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	249	740	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	279	740	370	Request for Continued Examination (RCE)	
169	169	900	900	Request for expedited examination of a design application	
Other fee (specify) _____					
SUBTOTAL (3)					(S) 180.00

\*Reduced by Basic Filing Fee Paid

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	James D. Shaurette	Registration No. (Attorney/Agent)	39,833
Signature		Telephone	(509) 624-4276
		Date	9/10/02

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